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LLANFYLLIN
RURAL DISTRICT COUNCIL.

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

YEAR 1947.

R. A. Bryan, Printer, Llanfyllin.

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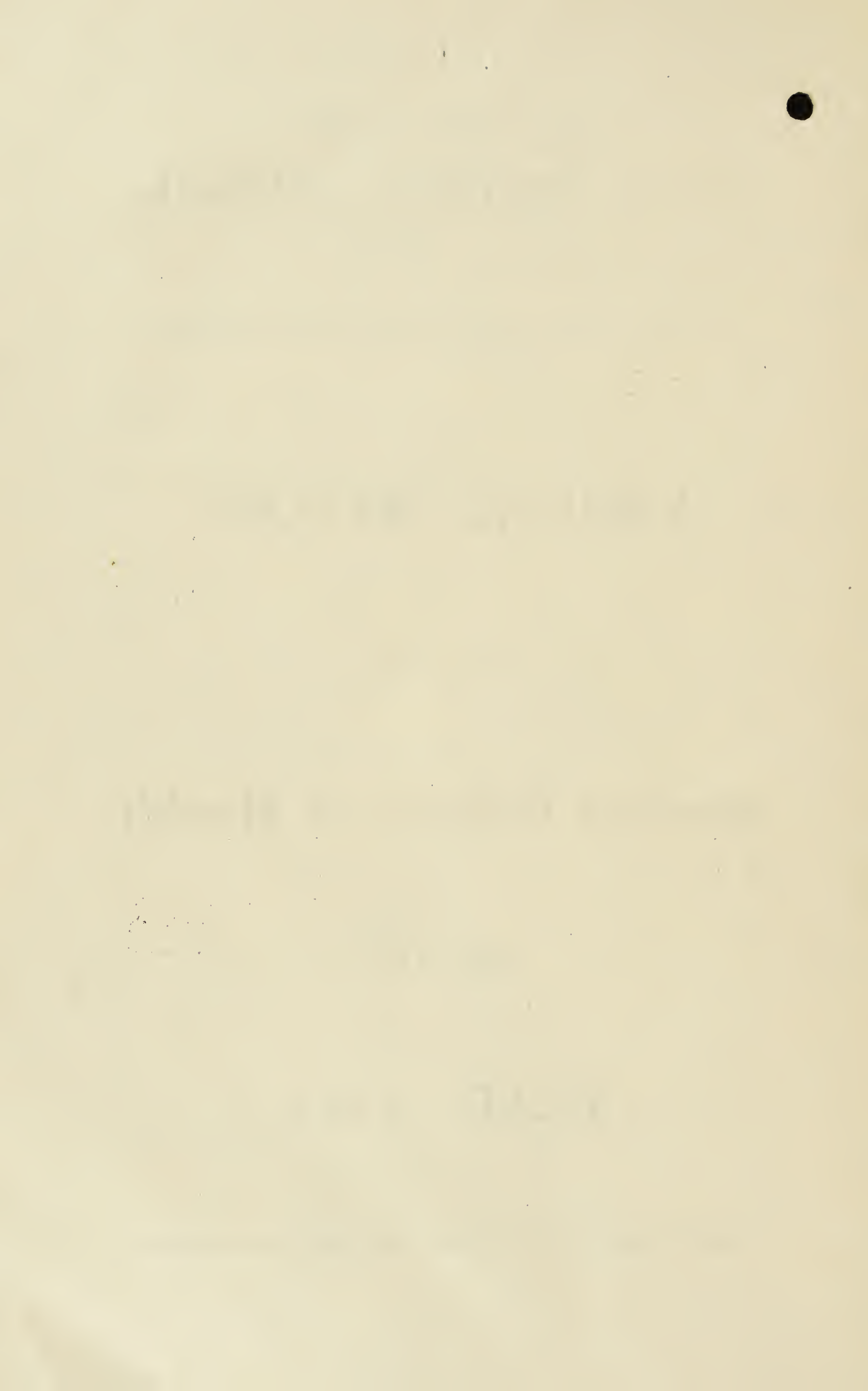
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CARTREF,
LLANFAIR CAEREINION,
WELSHPOOL.

9.8.1948.

*To the Chairman and Members of the Llanfyllin Rural
District Council.*

Ladies and Gentlemen,

I have the honour of submitting to you my Annual Report, dealing with the Vital Statistics, Health and Sanitary Circumstances of your District for the year 1947.

General Health appears to have been satisfactory during the year.

Measles, which was extensively epidemic during the previous year, persisted in some measure into the year under review and virtually came to an end during Spring and early Summer. The epidemic does not appear to have left any ill effects and none have been reported.

The Vital Statistics disclose the usual fluctuations which, when dealing with small population groups, appear much larger when standardized than the annual figures for larger populations.

It is gratifying to notice that some of the many proposed housing schemes are materialising and that much needed houses are being erected and that some have been completed. The urgency for more houses, however, still persists.

Major schemes for the supply of water generally and for the installations of sewage systems in the many villages in the district are still in abeyance and are as urgent as the necessity for houses.

I would like to take this opportunity to thank your officials for the help and guidance which they afforded me during the year and which I greatly appreciated.

I have the honour to remain,

Ladies and Gentlemen,

Your obedient Servant,

W. MILTON JONES.

SECTION "A."

Statistics and Social Conditions of the Area.

Area of the District—163,477 Acres.

Registrar-General's estimate of Population for the year 1947—10,360.

Population (1931 Census)—11,487.

Number of Inhabited Houses—2,856.

Rateable Value—£54,941.

Sum represented by a Penny Rate—£227.

Extracts from Vital Statistics for the Year 1947.

			Male.	Female.	Total.
Live Births	| Legitimate	...	86	82	168
	| Illegitimate	...	6	10	16

Birth Rate per thousand of the estimated population—17.76.

			Male.	Female.	Total.
Still Births	| Legitimate	...	4	2	6
	| Illegitimate	...	Nil	Nil	Nil

Still Birth Rate per thousand of the estimated population—0.57

Deaths. Males—67; Females—74; Total—141.

Death Rate per thousand of the estimated population—13.6.

Number of Women dying in or in consequence of child birth:

From Sepsis—Nil; From other causes—Nil.

Maternal Mortality Rate per thousand total Births—Nil.

Number of Deaths of Infants under 1 year:—

			Male.	Female.	Total.
	| Legitimate	...	5	1	6
	| Illegitimate	...	Nil	Nil	Nil

Death Rates of Infants under 1 year of age:—

All Infants per thousand Live Births—32.6.

Legitimate Infants per thousand Live Births—32.6.

Illegitimate Infants per thousand Live Births—Nil.

Deaths from Cancer:—

Male—12; Female—12; Total—24.

Average age at deaths of those dying from Cancer—65 years.

Deaths from Measles (all ages)—Nil.

Deaths from Whooping Cough (all ages)—Nil.

Deaths from Diarrhoea (under 2 years of age)—Nil.

Total Deaths of Residents of the area who died in Hospitals and Institutions—27.

Percentage (of Total Deaths) occurring in Hospitals, Institutions, etc.—19.1.

Average age at Death (excluding deaths under 1 year of age) of those residents of the area whose deaths were allotted to the area—63.

Average age at Death (excluding deaths under 1 year of age) of those who died in the area and whose deaths were allotted to the area—70.1.

Deaths from Tuberculosis:—

Non-Pulmonary ... Male—1; Female—2; Total—3.

Pulmonary ... Male—1; Female—2; Total—3.

Average age at Death of those who died as a result of Tuberculosis (all forms)—26.3.

Death Rate for England and Wales—12.0.

Birth Rate for England and Wales	|	Live Births—20.5.
		Still Births .5.

Infant Mortality Rate for England and Wales per thousand Live Births—41.

Still-Birth Rate for England and Wales per thousand of the estimated population—.5.

Maternal Mortality Rate for England and Wales per thousand Total Births—1.17.

Maternal Mortality.

It is again pleasant to record that no deaths were reported during the year as being attributable to maternal causes.

Ante-natal services are being constantly extended and improved, and expectant mothers appear to take greater advantage of these services and with increasing knowledge, they co-operate more readily and intelligently in all the efforts now being made to safeguard them and to minimise the risks of motherhood.

For various reasons, mainly because of the difficulty now experienced in obtaining adequate home help, more expectant mothers are seeking admission into Hospitals and similar institutions for their confinements.

Infantile Mortality.

During the year under review the deaths of six infants under 1 year of age were notified, and of these five were males and one was a female—all were legitimate.

Of these one died from Congenital Heart Disease at 7 hours and another—at 3 months—died from a similar condi-

tion. Two, at 4 weeks and 4 days respectively, died as a result of other congenital malformations, and the remaining deaths were due to prematurity—their ages being 2 days and 6 hours respectively.

A survey of the past years would appear to indicate a very gratifying decrease in Infantile Mortality and the reasons are varied.

Ante-natal and post-natal services now work very efficiently with the active and intelligent co-operation of mothers and expectant mothers.

Ante-natal examinations and supervision are most important in that any deviation from normal can be detected and, in so far as is possible, corrected and controlled.

Appropriate vitamin containing foods are now more freely available for mothers and babies, and the extension of maternity and midwifery services play a very important part in the general welfare of babies and mothers.

The following is the Registrar-General's detailed list of the various causes of death—together with numbers and sex—allotted to the area during the year 1947:—

	Males.	Females.
Tuberculosis (of the Respiratory System) ...	I	2
„ (other forms) ...	I	2
Influenza ...	I	—
Cancer (all forms) ...	12	12
Intracranial Vascular Lesions ...	5	13
Heart Disease ...	16	19
Other Diseases of the Vascular System ...	I	I
Bronchitis ...	3	3
Pneumonia ...	3	—
Other Digestive Diseases ...	—	I
Nephritis ...	6	I
Premature Birth ...	I	—
Congenital Malformations, etc. ...	5	I
Suicide ...	I	I
Road Traffic Accidents ...	I	—
Other Violent Causes ...	—	2
All Other Causes ...	10	16
Total ...	67	74

Of these deaths 73 were 70 years and upwards, and of these, 27 were 80 years and over, and 5 were 90 years and over.

The following Table summarizes the Vital Statistics of the District
for the Years 1931—46.

Year	Per 1,000 Population				Per 1,000 Births (Live <i>and</i> Still),	
	Birth Rate	Death Rate	Death Rate from Tub- erculosis	Death Rate from Cancer	Maternal Mortality Rate	Rate of Deaths under 1 year
1931	18.0	13.6	0.68	1.63	9.5	81
1932	20.1	14.4	0.43	1.88	8.5	51
1933	14.1	14.6	0.43	2.25	Nil	55
1934	15.7	13.8	0.53	2.28	5.37	100
1935	16.2	12.9	0.62	1.4	Nil	41.6
1936	14.1	13.1	0.54	1.8	5.7	53.8
1937	13.7	14.6	0.63	2.1	6.17	46.6
1938	15.05	12.65	.64	1.38	11.9	49.1
1939	16.4	14.65	.27	1.9	Nil	89.4
1940	11.8	16.7	.46	2.8	Nil	85.1
1941	14.3	15.09	.42	1.04	5.3	61.9
1942	15.3	15.1	.53	2.3	Nil	46.2
1943	17.1	11.9	.09	1.9	Nil	31.6
1944	17.3	14.1	.28	2.0	5.3	44.2
1945	18.52	13.53	.38	2.0	Nil	41.4
1946	15.25	13.1	.38	2.2	Nil	37.5
1947	17.76	13.6	.56	2.4	Nil	32.6

SECTION "B."

General Provision of Health Services for the Area.

No change took place during the year and the general position is as detailed in the Annual Report for 1946.

SECTION "C."

Sanitary Circumstances of the Area.

Water Supplies.

The Welsh Board of Health have suggested that the following information with regard to Water Supply should appear in the Annual Report.

Quality.

It is necessary to distinguish between the public supplies operated by the Council and supplies obtained from private sources.

There are eight piped water schemes administered by the Council and in each case the quality of the water supplied is good.

Generally speaking the privately owned supplies fall far below the quality of the public supplies and it is doubtful whether more than 50% of privately owned supplies are satisfactory in quality.

Quantity.

The position is as stated in my Annual Report for 1945.

Samples Taken.

The following are results of samples taken from public mains and submitted for Bacteriological examination:—

Number of samples of treated water submitted for			
bacteriological examination	...	...	5
Number found satisfactory	...	...	5

Plumbo-Solvent Action.

I would not expect any of the public piped water supplies to have a marked aggressive action on metals. In two cases the water is passed through a contact chamber of limestone chippings to counteract any acidity in the water.

Contamination.

No action necessary.

Proportion of Houses with Public Supply.

The following table shows the number of dwelling houses and the approximate number of the population in each parish supplied with water from public mains, direct to the house or by means of standpipes.

Parish.	Houses connected to a public main.	Population served. (Approx.)	Houses supplied from public standpipes.	Population served. (Approx.)
Meifod ...	26	104	45	180
Llanerfyl ...	16	64	24	96
Llansantffraid (Pool)	32	128	84	336
Pennant ...	19	76	27	108
Llangynog ...	7	28	71	284
Llangadfan ...	3	12	21	84
Llanfair C. ...	94	376	97	388
Llanfihangel } Dolanog Village }	5	20	—	—
Garthbeibio ...	Nil	Nil	1	2
Llangyniew ...	Nil	Nil	Nil	Nil
Hirnant ...	Nil	Nil	Nil	Nil
Llandysilio ...	Nil	Nil	Nil	Nil
Llandrinio ...	Nil	Nil	Nil	Nil
Llanfechain ...	Nil	Nil	Nil	Nil
Llansantffraid (Deytheur) ...	Nil	Nil	Nil	Nil
Guilsfield (Without)	Nil	Nil	Nil	Nil

SCHEMES NOT OPERATED BY THE COUNCIL.

Parish.	Houses connected to a public main.	Population served. (Approx.)	Houses supplied from public standpipes.	Population served. (Approx.)
Llanfihangel ...	7	28	2	8
Llanwddyn ...	75	300	9	36
Llanrhaiadr ...	17	68	24	96
Carreghofa ...	29	116	Nil	Nil

Drainage and Sewerage.

I can only repeat the observations on this subject made in my Annual Report for 1944, and express the hope that it will be found possible to proceed with sewerage schemes in the near future.

Closet Accommodation.

The position is as stated in my Annual Report for 1946.

Public Cleansing

The position is as stated in my Annual Report for 1946.

Sanitary Inspections.

The following table shows the result of inspections made by the Sanitary Inspectors during the year:—

Number of Informal Notices served	...	111
Number of Informal Notices complied with	...	48
Number of Statutory Notices served	...	7
Number of Statutory Notices complied with	...	4
Number of Houses found to be totally unfit for human habitation (in addition to those previously reported)	... ..	Nil
Number of Food Condemnation Certificates issued	... ..	15

Quantity of Food Condemned.

Corned Beef	12 $\frac{3}{4}$ lbs.	Lamb	... 7 lbs.
Bacon	... 46 lbs.	Beef	... 491 lbs.
Ham	... 26 lbs.		

Other Foods.

116 ozs. of Canned Milk.	2 lbs. of Canned Beans.
6 lbs. of Unsweetened Cooking Apples.	1 lb. of Salmon.
2 $\frac{1}{2}$ lbs. of Apricots.	14 ozs. of Evaporated Milk.
2 $\frac{1}{2}$ lbs. Carrots.	2 $\frac{1}{2}$ lbs. Golden Plum.
19 ozs. Processed Peas.	3 $\frac{1}{2}$ ozs. of Household Salmon.
1 Tin of Peas.	1 lb. of Scotch Broth.
30 lbs. of Prunes.	

Milk and Dairies Regulations.

There are now 570 registered milk producers in the area. During the year 71 applications for registrations were made. The total number of applications granted was 51, several of these having been submitted during previous years.

In most cases improvements to dairy premises were required upon registration, and the following Table shows the defects remedied during the year in premises which were registered for milk production:—

Defective Ceilings	...	...	...	34
Defective Floors	...	...	...	83
Insufficient Light and Ventilation	...	...	...	66
Want of Limewashing	...	...	...	64
Defective Drainage	...	...	...	57
Want of Cooler	...	...	...	58
Want of Milk Room	...	...	...	60
Other Defects	...	...	...	155

Shops and Offices.

No action taken during the year.

Camping Sites.

There are no licensed camping sites in the district.

Smoke Abatement.

No action necessary.

Swimming Baths and Pools.

There are no Swimming Baths or Pools in the district.

Eradication of Bed Bugs.

No action necessary.

Housing.

At the end of the year there were 9 recorded cases of overcrowding in the district. There is no doubt, however, that if another survey were made many additional cases would be revealed.

No houses were found to be totally unfit for human habitation during the year. The total number of houses in the district which have been reported to the Council as entirely unfit for human habitation and not yet dealt with is 82.

Schools.

There were no school closures during the year.

The epidemic of Measles of the previous year, and which continued into the early part of the year under review, while mainly affecting the child population, ultimately settled, leaving no ill-effects.

Children appear to be generally healthy, happy, well nourished and well clothed, and they have benefited by, amongst other things, the increased prosperity which has come to agriculture during recent years.

In addition, the welfare of children is increasingly being cared for and supervised by the various health organisations both in and controlled by the County Council.

With this care and control and guidance the physical state of modern children has improved very materially when compared with that which existed only a few years ago.

Periodic inspections and examinations of school children by the County Medical Organisation and School Medical Staff disclose any abnormal conditions or tendencies, and these can be corrected or improved by reference to the family doctor and the appropriate hospital department.

Immunisation of children continues to be carried out by the School Medical Officer and his staff and, with very few exceptions, the majority of children are now protected against Diphtheria.

SECTION "F."

Prevalence of, and Control over, Infectious Diseases.

During the year under review 68 cases of Infectious Diseases were notified—a very marked reduction upon the figures for the preceding year.

Measles, which was epidemic in 1946, had practically disappeared by the Spring of 1947, but a minor epidemic prevailed in the latter months of this year. All cases appear to have settled, leaving no ill-effects.

During the year 3 cases of Acute Anterior Poliomyelitis (Infantile Paralysis) were notified. All of these cases were admitted into the appropriate Hospitals, where two were detained for many weeks owing to the comparatively extensive paralysis. The stay of the third case was short, as the paralysis, which was not extensive, settled speedily.

The latter case may have contracted the infection in the Midlands when on holiday.

The other two cases resided in very isolated farms with little outside contacts apart from those made in local schools. It is difficult, therefore, to trace the source and origin of their infections.

It is again gratifying to note that no cases of Diphtheria were notified during the year, and it is fair to assume that this immunity is due to the fact that a large proportion of the children in the district have received the appropriate protective doses of Diphtheria anti-toxin.

It is again urged that those children not yet immunised should be protected without delay.

Guardians and parents of children receive invitations from the School Medical Authorities as to where and when children can be immunised. Failing this, the family medical attendant will only be too ready and willing to give the injections necessary.

Notification of Infectious Diseases during the year appears to have been satisfactory.

No vaccinations or re-vaccinations were carried out under the Public Health (Small Pox) Regulations.

No immunisation against Scarlet Fever was carried out during the year.

In an effort to control and prevent the spread of Infectious Diseases your Sanitary Inspectors carry out the necessary disinfection of infected premises.

They also give instruction and advice as regards isolation, personal and general hygiene, and methods of control which can be applied by those in charge of infected and infective patients—under home conditions.

The following Tables give an analysis of Infectious Diseases (Tuberculosis excepted) notified during the year:—

Diseases.	No. Notified.	Admissions to Hospital.		Deaths.
Whooping Cough	... 5	...	—	—
Pneumonia ...	... 17	...	—	3
Measles ...	... 35	...	—	—
Scarlet Fever ...	... 7	...	1	—
Diphtheria ...	... 1	...	—	—
Acute Poliomyelitis	... 3	...	3	—
Totals ...	68	...	4	3

Age Incidence of cases of Infectious Diseases Notified.

Disease.	Under 1 year	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65+	Total.
Whooping Cough	1	2	—	—	—	2	—	—	—	—	—	—	5
Pneumonia	—	1	—	—	—	2	—	1	6	2	3	2	17
Measles ...	—	1	2	4	7	7	10	1	2	1	—	—	35
Scarlet Fever	—	—	1	—	2	1	2	—	1	—	—	—	7
Diphtheria	—	—	—	—	—	—	1	—	—	—	—	—	1
Acute Poliomyelitis	—	—	—	1	—	1	1	—	—	—	—	—	3
Totals ...	1	4	3	5	9	13	14	2	9	3	3	2	68

Tuberculosis.

No action was taken during the year under the Public Health (Prevention of Tuberculosis) Regulations (1925) or under Section (2) of the Public Health Act of 1925.

During the year nineteen new cases of Tuberculosis were notified, and of these ten were males and nine were females. Of the males, eight were cases of Pulmonary and two were cases of Non-Pulmonary Tuberculosis. Of the females eight were cases of Pulmonary and one was a case of Non-Pulmonary Tuberculosis.

Average age at the time of notification of these cases was 26.5 years, and ages varied from 2 years to 62 years.

From records received it would appear that particulars of deaths in respect of seven persons were notified during the year. These comprise one male and one female who died as the result of Miliary Tuberculosis, and one male who died as the result of Tuberculous Meningitis.

Of the other deaths notified as being cases of Pulmonary Tuberculosis, one was a male and three were females.

Four of the deaths from Tuberculosis occurred in Hospitals.

The following is a Classification of new cases of, and deaths from, Tuberculosis according to type, age groups and sex:—

Age Periods.	NEW CASES				DEATHS.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
Years.	M.	F.	M.	F.	M.	F.	M.	F.
0—1	—	—	—	—	—	—	—	—
1—5	—	—	1	—	—	—	1	—
5—10	—	—	—	—	—	—	—	—
10—15	—	—	—	1	—	—	—	—
15—20	1	2	—	—	—	1	—	—
20—25	1	2	1	—	1	1	—	—
25—35	3	3	—	—	—	1	—	1
35—45	3	—	—	—	—	—	1	—
45—65	—	1	—	—	—	—	—	—
65+	—	—	—	—	—	—	—	—
Totals	8	8	2	1	1	3	2	1

Notification of cases of Infectious Diseases appears to be satisfactory. When necessary the disinfection of infected premises is carried out by your Sanitary Inspectors.

The work of the Welsh National Memorial Association continues to extend and is much appreciated.

Patients are becoming more co-operative and aware of the necessity of reporting early for appropriate investigation.

Mass X-Ray and investigation would be of much assistance in the detection of the early cases of Tuberculosis.

Laboratory Work and Facilities.

There are no changes to report.

Investigation of pathological and other materials, including the examination of blood for various purposes, is carried out in the various laboratories instituted as a war time measure.

Much of this work for this particular area is carried out in the Emergency Public Health Laboratory based in the Cardiganshire General Hospital, Aberystwyth, and is greatly appreciated.

The laboratories of the Welsh National Memorial Association continue to carry out investigations in material where Tuberculosis is suspected.

Prevention of Blindness.

No change in existing organisations, Hospitals or methods of supervision.

Cancer.

This disease accounted for 24 deaths during the year, twelve being males and an equal number of females.

The average age at death being 65 years, prospects of any cure for this disease appear to still remain in the early diagnosis of the condition, when treatment can be instituted with some measure of hope and success.





